2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J00161

Title:

Name:

Address: City-St-Zip: VST

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BLOOMINGTON, MN 55437

8200 NORMANDALE BLVD. SUITE 400

RYE, DOUGLAS W

FILED Feb 25, 2004 Secretary of State

D 0 0 0 11	000.	0 1			Occicially of old		
Entity Nar	me: SOUTHER	N BINGO SUPPLIES, INC.					
Current Principal Place of Business:			New Prince	New Principal Place of Business:			
	E PINE RD E PINE ROAD VILLE, FL 32210	6 US					
Current M	ailing Address	:	New Maili	New Mailing Address:			
	E PINE RD E PINE ROAD VILLE, FL 32210	6 US					
FEI Number:	59-2697647	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired	d()	
Name and	Address of Cu	rrent Registered Agent:	Name and	Name and Address of New Registered Agent:			
	IAN, T.E. E PINE ROAD VILLE, FL 32210	6 US					
	named entity su e of Florida.	bmits this statement for the	purpose of changing i	ts registered	office or registered agent,	or both,	
SIGNATUR	RE:						
	Electronic	Signature of Registered Ac	gent		Date	_	
Election Can	npaign Financing 1	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	V () D MCLANAHAN, T.E 5824 LONE PINE JACKSONVILLE,	ROAD	Title: Name: Address: City-St-Zip:	(() Change () Addition		
Title: Name: Address: City-St-Zip:	LISTER, ROY L	elete ALE BLVD., SUITE 400 MN 55437	Title: Name: Address: Citv-St-Zip:	LISTER, ROY 301 LOUTH S			

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

VST

RYE, DOUGLAS W 301 LOUTH STREET

ST. CATHARINES, ON L2S3V6 CA

(X) Change () Addition

SIGNATURE: T.E. MCLANAHAN V 02/25/2004